

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: WEST ALLIS CASTLE LLC (310730)

Address: 1234 S 112TH ST, WEST ALLIS, WI 53214

License Status: REGULAR

Licensed/Certified/Registered 02/01/2000

Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0095361 **End Date:** 06/23/2005 **Type:** OTHER **Purpose:** COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008824 Served 08/18/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.21(4)(r)	TREATMENT CHOICE		

Survey ID: 0093990 **End Date:** 01/24/2005 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10008761 Served 01/27/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.43(3)(b)1	TESTING BY SERVICE COMPANY	06/23/2005	Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Survey ID: 0090931 **End Date:** 08/13/2003 **Type:** OTHER **Purpose:** COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008584 Served 09/10/2003

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.21(4)(o)	MEDICATIONS	01/14/2005	Yes
83.21(4)(w)	SAFE ENVIRONMENT	01/14/2005	Yes
83.41(5)(d)2	HOT WATER TEMPERATURES	01/14/2005	Yes
83.42(3)(f)	SLEEPING HOURS EVACUATION DRILL	01/14/2005	Yes

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Enforcement History

Date: 09/08/2003 **SOD #**10008584 **Appealed:** No

Sanctions

COMPLY WITH FACILITY PLAN OF CORRECTION
FORFEITURE---83.42(3)(f)

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Complaint History

Date Complaint Received: 05/18/2005

Date Investigation Completed: 06/23/2005

Subject Area(s)

RESIDENT RIGHTS
HOMELIKE ENVIRONMENT & CLEANLINESS

Result

SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

10008824

Date Complaint Received: 12/03/2004

Date Investigation Completed: 01/24/2005

Subject Area(s)

STAFF TRAINING AND PROFICIENCY

Result

NOT SUBSTANTIATED

SOD #

Date Complaint Received: 07/09/2003

Date Investigation Completed: 08/11/2003

Subject Area(s)

MEDICATIONS

Result

SUBSTANTIATED

SOD #

10008584

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